

OSTEOPATHIC MANIPULATIVE TREATMENT GROUND RULES

1. **GENERAL:** Osteopathic manipulative treatment is a form of manual treatment applied by a physician to eliminate or alleviate somatic dysfunction and related disorders, and may be accomplished by a variety of techniques.
2. **CONCURRENT EVALUATION AND MANAGEMENT SERVICES:** When evaluation and management services have concurrently been provided in association with osteopathic manipulative treatment, it is acceptable to charge separately for these services only if the patient's condition required an evaluation or examination that is beyond the usual preservice and postservice work associated with osteopathic manipulative treatment. **Such additional services, however, shall be reported separately using modifier -25.** Charges for any evaluations and examinations after the initial visit must be documented and included with the bill.
3. **EXTENSION OF OTHER SECTIONS OF THE FEE SCHEDULE:** Since osteopathic manipulative treatment is similar to treatments and services contained within the Physical Medicine and Rehabilitation Section, the Ground Rules applicable to the Physical Medicine and Rehabilitation Section shall be similarly applied.
4. **BODY REGIONS:** Body regions commonly involved in osteopathic manipulative treatment are: head region; cervical region; thoracic region; lumbar region; sacral region; pelvic region; lower extremities; upper extremities; rib cage region; and abdominal and visceral region.
5. **FAILURE OF PATIENT TO KEEP A SCHEDULED APPOINTMENT:** In the event a patient fails to keep a scheduled appointment, the health care provider is not to bill for any services that would have been provided by said appointment nor shall there be any reimbursement for such scheduled services (i.e., reimbursement for a "no show" appointment is not allowed). This rule does not apply with regard to a deposition, testimony, or IME.
6. **COST CONTAINMENT:** Nothing in this section shall preclude an employer (or insurance carrier) from entering into payment agreements to promote the continuity of care and the reduction of health care costs. Such payment agreements, if less, will supersede the limitation amounts specified herein. Please refer to K.S.A 44-510i(e) for further clarification, if necessary.

CONVERSION FACTOR = \$54.43

OSTEOPATHIC MANIPULATIVE TREATMENT

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CODE	UNIT VALUE
98925	0.79
98926	1.09
98927	1.40
98928	1.66
98929	1.91